



CIH POLICY SUBCOMMITTEE

January 26, 2016

CIH Transform is a multi-year effort to engage stakeholders and advance services for individuals with disabilities

Welcome and Introductions

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- **Chair**

- Mimi Huybers, DDRS Advisory Council - Parent Advocate

- **Partners**

- Nicole Norvell, Director, DDRS

Introductions (cont.)

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□ Members

Name	Title	Organization
Jim Wiltz	Director of Milestones Clinical & Health Resources	Stone Belt
Gail Kahl	CEO	Opportunities for Positive Growth
Donna Elbrecht	CEO	Easter Seals ARC
Allison Wharry	CEO	New Hope
Jennifer Lantz	Executive Director of Case Management Operations	IPMG
Karla Kincade	District 5 Manager	BDDS
Andra Cochran	Parent	

Introductions (cont.)

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□ **Members**

Name	Title	Organization
Christiaan Campbell	President	Bridges of Indiana
Angella Tyler	Interim President/CEO	Tangram
Clint McKay	Director of Operations	The ARC of Indiana

Advisory Subcommittee Objective

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The DDRS Advisory Council Subcommittees are being engaged to advise and assist DDRS in developing plans and implementing the BDDS CIH waiver changes proposed in the waiver amendment submitted to CMS on January 4, 2016.

In approaching subcommittee activities, DDRS is intending to engage members in decision-making that ultimately makes progress toward a waiver that assists individuals and families in:

- making more informed choices,
- creating flexibility in services and supports,
- moves the existing waiver system forward, to one that begins to provide more sustainable, family focused, community-based options, and
- reflects support of system capacity, balanced with provision of quality services to waiver participants.

Advisory Subcommittee Objective

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Each subcommittee will be asked to assist DDRS in an implementation approach and input that meets these means, while also adhering to current CMS guidance in relation to Home and Community Based Services settings requirements , as well as person-centered planning concepts.

DDRS appreciates each member's time and participation in this effort, and welcomes this collaborative opportunity. Thank you in advance for your assistance with this project.

Community Integration & Habilitation Waiver (CIH)

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- Needs based Medicaid 1915(c) waiver available to those who meet very specific criteria
 - 1915(c) waivers allow provision of long term care services in home and community based settings under Medicaid. Programs can provide a combination of standard medical services and non-medical services
- Objective Based Allocation (OBA), which is the amount of money the individual has to purchase his/her services via the CIH, is determined by combining the overall Algo score, age, employment, and living arrangement of the individual,
- Wide array of services including residential supports
- Each participant has a Case Manager who oversees services and supports

CIH: Federal Role (CMS, OMB, etc.)

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- Medicaid waiver services receive matching federal funds (66.60% in FFY'16)
- Centers for Medicare & Medicaid Services (CMS) serves as the federal oversight agency for all Medicaid waivers, including 1915(c) HCBS waivers.
 - Provide support to State-administered Medicaid plans and Home and Community Based Services (HCBS) waiver programs.
 - Application and amendment approval from states
- Office of Management and Budget (OMB) provides financial oversight and approval

HCBS Waiver – CIH Priority Categories include:

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- Transitioning from:
 - ▣ Nursing Facility (NF)
 - ▣ Extensive Support Needs (ESN)
 - ▣ Supervised Group Living (SGL)
 - ▣ Comprehensive Rehabilitative Management Needs Facility (CRMNF)
- Transitioning from 100% State Line funding
- Aging out of services with:
 - ▣ Department of Education (DOE)
 - ▣ Department of Child Services (DCS)
 - ▣ Supervised Group Living (SGL)
- Death of Primary Caregiver where there is no other caregiver available

HCBS Waiver – CIH Priority Categories

include: (cont.)

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- ❑ Caregiver of 80 where there is no other caregiver available
- ❑ Evidence of abuse or neglect in current setting
- ❑ Extraordinary health and safety risk as reviewed and approved by the Division Director
- ❑ Individuals can request CIH at anytime - each case is reviewed on an individual basis

Home & Community Based Services

CIH Waiver Services Currently Provided

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- ❑ Adult Day Services
- ❑ Case Management
- ❑ Behavioral Support Services
- ❑ Community Based Habilitation- Individual and Group
- ❑ Community Transition
- ❑ Electronic Monitoring
- ❑ Environmental Modifications
- ❑ Extended Services
- ❑ Facility Based Habilitation- Individual and Group
- ❑ Family and Caregiver Training
- ❑ Music Therapy
- ❑ Prevocational Services
- ❑ Recreational Therapy
- ❑ Residential Habilitation and Support – Hourly and Daily
- ❑ Respite
- ❑ Structured Family Caregiving
- ❑ Transportation
- ❑ Workplace Assistance

Current CIH Budgeting Process for Individuals Served

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- ❑ The BDDS System currently calculates an overall budget for the individual called an Objective Based Allocation (OBA).
- ❑ Within the OBA there are allocations for Residential Services, Day Services and Behavior Management Services
- ❑ There are also Allocations outside the OBA
(Case Management, Transportation, Wellness. Etc.)
- ❑ Based on the Allocations the Case manager works with the individual to develop an Individual Support Plan (ISP) to meet their needs
- ❑ The ISP includes the array of services the individual believes will meet their needs within the OBA

Enhanced Residential Living

NEW

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- Replaces Residential Habilitation Supports – Daily
- For individuals who demonstrate 1:1 staffing is not required at all times and are able to be in the community with minimal supports
- May utilize Remote Support Technology
- Ensure participants receive services from well trained staff

Remote Support Technology

NEW

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- Replaces Electronic Monitoring
- Expands options available to participants to increase independence
- Includes, but is not limited to:
 - ▣ Live monitoring
 - ▣ Sensor technology
 - ▣ Medication oversight and support
 - ▣ Remote vital sign monitoring
 - ▣ Push-button connectivity
 - ▣ Personal emergency response systems

Adult Family Living

NEW

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- ❑ Replaces Structured Family Caregiving
- ❑ Principal caregiver may be a non-family member or a family member who is not the participant's spouse
- ❑ Ensures the participant will receive services from a well trained Adult Family Living (AFL) provider
- ❑ Provider agencies must include respite services
- ❑ Individual served must be 18 years of age or older

Intensive Residential Supports: Behavioral

NEW

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- ❑ Provides services and supports to individuals who need a more intense level of support
- ❑ Requires assessment by the DDRS clinical review team
- ❑ Includes components of Wellness Coordination, Behavior Management and Non-Medical Transportation
- ❑ May not be provided concurrently with Behavioral Support Services or Wellness Coordination

Intensive Residential Supports: Medical

NEW

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- ❑ Provides services and supports to individuals who need a more intense level of support
- ❑ Requires assessment by the DDRS clinical review team
- ❑ Includes components of Wellness Coordination and Non-Medical Transportation
- ❑ May not be provided concurrently with Wellness Coordination

Intensive Support Coordination

NEW

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- Participant must be enrolled to receive Intensive Residential Supports (IRS) – Medical or IRS – Behavioral
- Includes all activities of case management and supplemental activities that reflect specialized coordination of medical and behavioral support services
- Ensures participants will receive high quality case management from a well trained Intensive Support Coordinator

Non-Medical Transportation

NEW

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- Provided to support a participant in meeting their community integration goals including transportation to habilitation programs and leisure activities
- Available only after all natural supports are exhausted
- Offered in addition to medical transportation

Transportation for Community Employment and Volunteerism

NEW

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- ❑ Provided to support a participant in meeting their community integration goals
- ❑ Limited to travel to and from community work or community volunteer positions, interviews and/or orientations
- ❑ Available only after all natural supports are exhausted
- ❑ Offered in addition to medical transportation

Residential Habilitation Services – Hourly

Updated

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- Provides services and supports for individuals living alone with minimal supports or living in their family home
- Ensures participants receive services from well trained staff

Participant Assistance and Care

Updated

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- Participant Assistance and Care (PAC) services are now available through the CIH waiver.
- This service has previously been, and continues to be offered under the Family Supports Waiver.

Proposed Meeting Topics

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- ❑ Communication and Outreach Strategies
- ❑ Selection of Services and Budget Creation
- ❑ Individualized Support Plan Development
- ❑ Documentation of Services/Individualized Support Team Discussion/Growth and Progress
- ❑ Clinical Review Team
- ❑ Intensive Support Coordination/Transitions and Expectations

Questions & Comments

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- ☐ Other next steps?

Where to Find Documents

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- Go to www.in.gov/fssa/ddrs

 FSSA HOME

Under **Programs & Services**

 Click **Developmental Disability (BDDS)**

 Click [CIH Transform](#)